## **EXECUTIVE SUMMARY**

### **Missouri Mental Health Commission Meeting**

Fulton State Hospital—Plum Room 600 East Fifth Street Fulton, Missouri

**September 11, 2008** 

#### **PRESENT**

Ron Dittemore, Chair Beth Viviano, Secretary Phillip McClendon Patricia Bolster, M.D. Kathy Carter David Vlach, M.D.

# **STAFF**

Keith Schafer, Department Director Lynn Carter, Deputy Director Mark Stringer, Division Director, ADA Felix Vincenz, CEO, CPS Dr. Joe Parks, Division Director, CPS Bernie Simons, Division Director, MRDD Bob Bax, Director's Office Brent McGinty, Administration Jan Heckemeyer, DMH Administration Pam Leyhe, Director's Office Audrey Hancock, Director's Office Cathy Welch, Director's Office Leigh Gibson, Consumer Safety Rikki Wright, General Counsel Dallas Jones, ITSD Director

### **GUESTS**

Laurie Epple, Division of ADA Tec Chapman, Division of MRDD Susan Pritchard-Green, MO Planning Council for DD Tim Swinfard, MO CMHC Greg Kramer, Life Skills Judy Alexander-Weber, Emmaus Homes Carol Baer, Emmaus Homes Edward Duff, NAMI-MO Shawn D'Abreu, Paraquad Jeff Prail, Paraquad Paul Blicharz, MCDHH Linda Blicharz, Deaf Advocate Marcia Brewer, Deaf Mental Health Marilyn Nolan, MOANCOR Rebecca Beck, LEAD Institute Marlene Theissen, Parent Tom Bestean, MSD Barbara Garrison, MSD Sharon Egbert, MSD Larry Hoard, MSD Jan Jones, GCBDD Lynn Garretson, SFC

Alicia Nissen, JCSFB Don Garretson, SFC Angela Graves, MCDHH Kim Davis, MCDHH Barry Critchfield, MCDHH Bruce Eddy, Jackson County MH Wendy Sullivan, Life Skills Joyce Prage, PLB Les Wagner, BCFR/MACDDS Peg Capo, DDRB Justin Kelly, Fulton Sun **Sharon Thomas-Parks** Cindi Keele, NAMI MO

Ella Eakins, MO Assoc of the Deaf

Jackie Lukitsch, NAMI-St. Louis

TOPIC/ISSUE	DISCUSSION
CALL TO ORDER/ INTRODUCTIONS	Phillip McClendon called the Missouri Mental Health Commission Meeting to order at 11:00 a.m. on September 11, 2008. The meeting was held at Fulton State Hospital, Plum Room, 600 East Fifth Street, Fulton, Missouri. Introductions were made.
APPROVAL OF MINUTES	• Ron Dittemore made a motion to approve the Minutes of the August 14, 2008 Mental Health Commission Meeting. David Vlach seconded the motion and the Minutes were approved.
OPEN DISCUSSION	Beth Viviano expressed that the tour of Fulton State Hospital was a very beneficial experience and, along with the other Commissioners, thanked those involved.
SBIRT GRANT	• Mark Stringer, Director of the Division of Alcohol and Drug Abuse, announced that Missouri is one of four states that has been awarded the Screening/Brief Intervention Referral and Treatment (SBIRT) Grant by the Substance Abuse Mental Health Services Administration (SAMHSA). The Division of ADA will receive, through the Governor's Office, a grant of \$14.6 million over a five-year period. Mark explained that the SBIRT Grant helps bridge the divide between prevention and specialty treatment. It will begin in the family practice clinic associated with Cox Hospital in Springfield, Missouri, in October 2008.
DEAF SERVICES DISCUSSION	<ul> <li>John Heskett introduced Ella Eakins, President of the Missouri Association for the Deaf, and Jeff Prail with Paraquad in St. Louis. Both are members of the Deaf Services Steering Committee that is working with DMH on issues associated with services for the deaf community. Mark Stansberry, Executive Director for BJC Behavioral Health in St. Louis, was unable to attend today as planned. Ms. Eakins and Mr. Prail presented a summary of issues regarding the FY 2010 Deaf and Hard of Hearing budget item and recommendations of the Deaf Services Steering Committee.</li> <li>Keith Schafer thanked Ella and Jeff for their presentation and noted that DMH currently provides deaf services in the facilities and through the Community Mental Health Centers. He noted the recommendations made by the Steering Committee now reflected in the budget item, and encouraged all entities to advocate for them.</li> </ul>
	• John Heskett outlined this budget item and shared that Mark Stansberry asked him to express his support of this budget item. This item is built on the concept of a Tele-Health Network to provide mental health services for individuals who are deaf utilizing American Sign Language (ASL) competent case managers at four regional sites to work directly with the deaf consumers from a central location. John noted that the availability of mental health professionals who are also competent in ASL is very low, making it difficult to recruit ASL-fluent individuals to staff a statewide effort. John explained some of the points of this proposed item:
	It would support the development of a Tele Health Network to provide direct communication between the mental health professional and the consumer utilizing ASL-competent psychiatric, psychological, nursing, and social work services at a host site, and ASL-competent case managers at four regional sites to work directly with the deaf

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	<ul> <li>consumers in need of services.</li> <li>The regional sites would be staffed with two case managers that will work with the consumers in those regions to respond to their needs at the local level to assist and support as recommended by psychologists, psychiatrists and other professionals at the host site.</li> </ul>
	▶ That regional network will provide the opportunity for direct communication and communication access to mental health providers for consumers who are deaf/hard of hearing that has been lacking in many situations.
	• Also being discussed is the development of school based programs at the Missouri School for the Deaf to provide for the needs of deaf students who require mental health services. The mental health professional employed by a CMHC will provide school based mental health services that augment the existing student support services available from MSD staff and will become a member of the MSD outreach team and provide training and consultation for school personnel throughout the state to address professional development needs.
	• Keith noted some other budget items that will impact deaf services if they are passed, such as Trauma-Informed Care and Caseload Growth.
	<ul> <li>Some audience members provided comments:</li> <li>Some in the deaf community want the department to provide mental health professionals who are also deaf/hard of hearing and ASL-fluent.</li> <li>There is a need for mental health professionals who are ASL certified and fluent.</li> </ul>
	<ul> <li>There is need for deaf services for children and for specialized training for licensed interpreters.</li> <li>Barry Critchfield shared the five states he thinks provide best services for deaf: Maine, Virginia, Maryland, South Carolina, Alabama. Their services can be found on their state websites.</li> <li>Direct services are preferred when working with deaf clients rather than going through interpreters.</li> </ul>
	• Beth Viviano reiterated that the deaf services item is in the budget and the deaf community must advocate with the legislature for that item.
PUBLIC COMMENT	• Judy Alexander-Weber of Emmaus Homes introduced Marline Theissen, parent of a son with MR and Autism, who shared testimony of issues related to her son being on the MRDD Waiver Wait List since 2000, and her concerns of what may happen to him if she is unable to care for him. She provided copies of her testimony.
	• Major Robert Trittler of the Crisis Intervention Team (CIT) of Greater St. Louis shared comments on the CIT programs in St. Louis and Kansas City. They formed the Missouri CIT Council. CIT is a partnership between law enforcement, consumers, their families, and service providers that assist police officers in understanding mental illness and de-escalating crisis situations. They are asking that funding for CIT expansion be included in the DMH budget every year. He provided a handout with an overview of the CIT program.
	• Edward Duff with NAMI-MO and the Governor's Council on Disability spoke as a consumer of mental health

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	services. He shared his concerns of being victimized when being sent to jail rather than a hospital when experiencing a crisis, and concerns of available bed space at mental health facilities in time of crisis.
	• Jackie Lukitsch, NAMI St. Louis, expressed that she cannot support the proposal for privatization of services in Kansas City. She feels consumers and family members have been left out of the planning process thus far, and asked that DMH consider this proposal very carefully.
	• Bruce Eddy, Jackson County Mental Health Fund, spoke in support of the need for Crisis Intervention Teams and asked for continued support as a budget item. He provided a handout expressing the concerns in Jackson County of the proposed privatization of the acute care hospital.
BUDGET DISCUSSION	Jan Heckemeyer and Brent McGinty provided handouts of the DMH FY 2009 Supplemental Budget and the FY 2010 Operating Budget Decision Items. Jan noted changes in the budget items since last meeting:
	<ul> <li>Overtime – as discussed last month, OA Budget and Planning has approved paying PRN from the overtime appropriations.</li> </ul>
	• <u>Caseload Growth</u> – now in Supplemental Funding as well as FY 2010 Budget, due to MO HealthNet expected caseload growth.
	<u>Cost-to-Continue Caseload Growth</u> – FY 2009 Growth for full year.
	• <u>Provider COLA</u> – we will not be allowed to place the 1% under Mandatories as discussed in previous meetings. The <u>overall increase</u> for this request is 3.7%.
	• <u>MRDD</u> — <u>Habilitation Centers Electronic Medical Records System</u> – added this item to ask for one-time funding to implement statewide electronic medical records system to access accurate and current electronic records quickly.
	• Kathy Carter asked for clarification on the Crisis Intervention Teams (CIT) Item being a one-time item. Keith explained that it went in the budget last year and came out as a one-time item. Keith expressed that the Commission can ask that this item be reinserted in the FY 2010 Budget Requests. Joann Leykam made a motion to place the one-time funding of \$200,000 CIT Item in the FY 2010 Operating Budget Requests. Kathy Carter seconded and the motion passed. Jan and Brent will adjust the Budget to include this item.
	Jan gave background of the DMH ranking process for decision items. OA Budget and Planning has approved all the items that are listed as Mandatory. The Commission needs to rank the other categories—Infrastructure Support and Access & System Change.
	Brent added the \$200,000 <u>Crisis Intervention Teams</u> Item under Access and System Change, at 026.
	<ul> <li>Veterans Initiative – David Vlach asked whether some of the services listed are normally provided by the Veterans</li> </ul>
	Administration. Pam Leyhe explained that these are federal grants that the Department of Veterans Affairs makes
	available to state agencies to meet veterans' mental health needs and is complimentary to federal funding for services.
	Add One Women's CSTAR Program and Diverting Children from Out-of-Home Placement – David Vlach asked how

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	<ul> <li>many people are being affected by these programs. Mark Stringer explained that those two combined would reach about 2,000 women, the vast majority of them with children. ADA serves close to 40,000 people. This proposed item would add another 2,000 to the number being served.</li> <li>Peer Specialists – Beth Viviano expressed concern that this item is ranked last under Access and System Change and asked for discussion on ranking that item higher.</li> <li>Patricia Bolster expressed concerns with the ranking process. Keith Schafer shared his thoughts on the importance of rankings and stakeholders advocating for items.</li> <li>Direct Care Career Pathways Pilot Program – Joann Leykam expressed that this item should be ranked higher and is a natural companion to Item 018—Community Mental Health Center (CMHC) Federally Qualified Health Center (FOHC) Collaboration Statewide Expansion. Joann Leykam made a motion to move Item 024 up to Item 019, Kathy Carter seconded and the motion was approved. Brent made that change.</li> <li>Add One Women's CSTAR Program – David Vlach made a motion to move this item from 017 to 015. Joann Leykam seconded and the motion was approved.</li> <li>Crisis Intervention Teams – Joann Leykam made a motion to rank this item at 026 under Access and System Change. Patricia Bolster seconded and the motion passed.</li> <li>Peer Specialist Item – Pam Leyhe suggested combining 025 Peer Specialists Item and 021 Supported Employment Opportunities Item. Beth Viviano made a motion to combine those items into one and keep at 022. Ron Dittemore seconded and the motion passed. This action moved Crisis Intervention Teams to 025.</li> <li>Kathy Carter commended and thanked all those who worked on the budget process and the Commission Budget Subcommittee.</li> <li>Keith Schafer also thanked all those who worked on the budget process and the Commission meeting, each division will be given most of the agenda time to focus on their division as it pertains to the Strat</li></ul>
ADJOURN	Beth Viviano made a motion to adjourn; Patricia Bolster seconded and the motion to adjourn passed by roll call vote.
FUTURE MEETINGS	The next Mental Health Commission Meeting is scheduled for October 8-9, 2008 at Ozark Center, Joplin, Missouri.
ADJOURN	The Mental Health Commission adjourned at 2:30 p.m.
	Phillip McClendon, Chair